

BACKGROUND: There are 6,122 people living with HIV (PLHIV) in Scotland today. Despite advances in treatment, living with HIV can exacerbate vulnerability to mental health conditions such as depression, anxiety, and suicidal ideations. Social distancing measures in response to COVID-19 pandemic has prompted a need to understand the factors that produce and reinforce psychosocial distress in Scotland. Given the higher prevalence of mental ill-health among PLHIV, this research comes at a critical time where targeted interventions are required to ensure that PLHIV can develop strategies to cope with an ongoing COVID-19 crisis.

METHODS: An online cross-sectional survey assessing mental wellbeing among PLHIV in Scotland during COVID-19 lockdown between April and May 2020.

RESULTS: The survey reached 50 PLHIV across eight Scottish health boards. 83% identified as male, 11% female, 4% did not disclose, and 2% identified as 'other'. Age ranged between 20 and 68 (μ : 46). 68% self-identified as gay men, 9% as bisexual, 13% as heterosexual, 6% as queer, and 4% did not disclose. In the twelve months prior to COVID-19, nearly half of participants reported anxiety or panic attacks, 38% health anxiety and 46% depression; no participants reported thoughts on self-harm; 15% reported suicidal feelings; and 46% were taking medication for a mental health condition.

▪ Mental Health Concerns

In the two weeks prior to taking the survey, participants reported feeling nervous, anxious or on edge (72%); felt they couldn't stop or control worrying (56%); had trouble relaxing (76%); felt they were easily annoyed or irritable (69%) and felt afraid as if something awful might happen (59%). 69% reported feeling down, depressed or hopeless because of COVID-19. 82% experienced tiredness or had little energy; 74% had little interest or pleasure in doing things; 62% felt bad about themselves or had a feeling that they failed at something; 79% had trouble concentrating; 21% had thoughts of self-harm; and 31% had thoughts that "they would be better off dead".

▪ Social Concerns

72% reported that they felt socially isolated from others during COVID-19; 64% felt a lack of companionship and 67% experienced loneliness. When asked about their social support system, such as friends or family, some participants reported not having someone to rely on when they were sick (33%) or depressed (33%). 36% stated that they don't know anyone with whom they'd like to do things with.

▪ Access to healthcare

59% had 'moderate' to 'extreme' concerns about the ability of the Scottish health system to care for the needs of PLHIV during COVID-19. 44% of participants reported having accessed healthcare and 13% mental health services during the pandemic, despite some reports of difficulties in engaging these services (23% and 15%, respectively).

▪ Financial Concerns

At the time of the survey, 1/4 were unemployed. Of those who were employed, 21% stated that their income does not cover their everyday needs, such as rent, mortgage, food, clothing, and basic necessities. 44% had 'moderate' to 'extreme' concerns about job security; 66% had 'moderate' to 'extreme' concerns about the financial implications during COVID-19 pandemic.

CONCLUSIONS: COVID-19 is putting a significant strain on the mental health of PLHIV across Scotland. Our research suggests that the burden of mental ill-health is borne disproportionately by PLHIV during the ongoing COVID-19 pandemic and is further exacerbated by existing mental health conditions, financial insecurities, and social isolation and lack of support. The negative mental health effects of COVID-19, coupled with the realities of living with HIV, can further exacerbate vulnerability to mental health conditions and lead to negative health behaviours such as such a non-adherence to medications and treatment regimes. In particular, depression has long been recognised as a predictor of negative health outcomes in PLHIV, with many studies highlighting higher rates of depression, anxiety, and social isolation among people living with HIV compared to the general population. Similarly, factors such as HIV-related stigma, fear of death and disclosure, and fatigue and frailty, can play a significant role in negative mental health outcomes for individual living with HIV. Such factors can present a significant challenge for PLHIV in the context of the continuing COVID-19 social distancing measures, where access to social networks and healthcare are limited. Unless action is taken to ensure better access to support and care, including interventions aimed at bringing our communities together, whether virtually or socially distanced, and to strengthen the resilience of PLHIV in times of change and uncertainty, mental health disparities are likely to continue as COVID-19 persists.

LIMITATIONS: Whilst the survey aimed to be representative, the degree to which the survey is representative of the larger population living with HIV in Scotland is influenced by the potential selective factors associated with recruiting participants from clinics and third sector organisations across Scotland. Therefore, certain population groups are not fully represented in the sample, namely transgender and black, Asian and minority ethnic individuals.